STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
DIVISION OF ENTERPRISE TECHNOLOGY
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DOA AGENCY IT PLANS MAILBOX
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High-Profile Information Technology Project Status Report

Department:	Department of Corrections
Project Name:	Electronic Medical Record
Business Sponsor:	Cathy Jess

Date of Report: 4/9/2018	Reporting for Quarter: 3/31/2018
Project Start Date: 12/5/16	Planned Implementation Date: 3/1/19
Estimated Project Cost: $18.3m	Amount Provided Through Master Lease: $1.7m

Project Description – *Enter a brief description of the project, including the business case for it and its major deliverables.*

Objectives: Streamline patient health information/access across DOC's health system to improve patient outcomes, increase productivity, offset costs, increase practitioner communication and collaboration. Decrease duplication of services, promote immediate (real-time) access to necessary information for the team, ensure safe keeping of information, and assist with decreasing error potential in healthcare delivery. Maintain care from location to location.

To achieve these objectives, DOC will implement an Electronic Medical Record (EMR) from Cerner Corp. and Dentrix from Henry Schein. Specific solution areas include core/foundations, workflow for nursing, provider, dental, mental health, registration, scheduling, him/charting, laboratory, meds process, pharmacy, supply chain, and reporting. Also includes data warehouse & regulatory, interfaces, testing coordination, roll-out, training, and related infrastructure.

Cerner has been engaged to implement Cerner Millennium model experience for the first 5 sites and provide ongoing support committing to 99.9% availability. Remaining sites will be rolled out via a separate project that DOC will lead.

Project Funding – *Please describe all sources of funding for the project, which should add up to the estimated project cost cited above.*

The updated estimate covers project and support costs over 4 fiscal years (2016-2019). Funding sources: GPR funding of $10.6m including End of FY Reallocation, Biennial Budget realization, and 167 EMR Reserve of $4m. Also includes SCAAP Grants of $2m and $1.7m in master lease funding.

Project Status – Determine the status for the Schedule and Budget categories below based on the guidelines on the right and described in more detail on page 2 of this document.	STATUS COLOR INDICATORS	
	Green	On target as planned
Insert an X in the column that best describes the status of the category. Add comments for that category as needed.	**Yellow**	Encountering **issues** (e.g., Schedule or Budget over by 10% to 25%)
Additional comments are not required if the status is Green, but if a category has a status of Yellow or Red, describe the issues or problems and what actions the agency is taking to address them.	**Red**	Encountering **problems** (e.g., Schedule or Budget over by 25% or more)

Project Status Categories	Green	Yellow	Red
Schedule Status On December 11th, we implemented the EMR for five pilot sites. Stabilization efforts continue. Focus is now on support activities (14 high priority tickets, 27 high priority changes, and pharmacy). Roll-out planning for the remaining 30 sites has begun. Two sites may not be ready to migrate in December. OSCI is completing construction of their Health Services Unit (HSU) at the end of the year and MSDF processes and procedures are very different than the others. Two sites planned to go-live on 4/23 as well as DCC Psychologists. Dentrix roll-out continues ahead of the full EMR roll-out.	☐	☒	☐
Budget Status	☒	☐	☐

A total cost of ownership analysis and funding plan was completed to fund the project and ongoing support. The total project and support estimate was increased to $18.3m to include one additional fiscal year, covering a total of 4 fiscal years (2015-2019). This updated estimate includes the roll-out for 30 remaining sites and stabilization activities for pilot and remaining sites.

This document can be made available in alternate formats to individuals with disabilities upon request.

Summarize Any Completed Major Tasks or Project Phases:
Resolved 432 tickets and 140 change requests since the implementation of the pilot sites. Central Pharmacy identified 14 critical issues, 45 overall; 9 critical and 17 high priority items are open as of 4/2/18. As a result, we established a team to focus on pharmacy stabilization, including improved access to information, shipping validation, and other changes (also known as mPage development, scripting and configuration).

Defined additional job aids and provided go-live support for pilot sites. Defined plans to roll-out remaining sites and started site assessments. Scheduled training sessions and prepared for Milwaukee Women's Correction Center, DCC Psychologist, and TCI infirmary implementations slated for 4/23. Completed several additional Dentrix implementations including KMCI, RYOC, STF and RCI. Dragon dictation software was installed for providers and psychologists.

Summarize Any Significant Project Changes Affecting Schedule, Budget or Scope:
For each change, describe what the change involved, when it was approved, and the reasons behind the approved change.
Completed the initial fixed price, fixed timeframe project with Cerner. DOC began leading stabilization activities for the pilot sites and planning implementations for 30 more sites. Stabilization activities will continue through 3/1/2019 as more sites go live. The overall project estimate was increased by one additional fiscal year within this report to include this work. The total cost of ownership remains unchanged.

Funding of $466k approved for Cerner Amendment #3 including go-live support, software, and training.

Funding of $386k approved for 200 additional licenses to account for 98 additional health staff added during the 2018-2019 biennial budget, 15 DCC users, and refined estimates for current health, security, and treatment staff.

Additional Comments or Issues *(optional)*:
If you have any additional overall status comments about the project (e.g., project news, accomplishments, emerging challenges or risks that could affect the project), please provide them here.
Analysis of value measures planned for the next period including:
1) Improve safety through: drug reaction checking, monitoring for medication non-compliance, mitigation of health care services risks, improvement in continuity use of best practices, decrease of adverse drug reactions, decrease the risk of HIPAA violation, real time updates of medication order changes, reduce number of medication delivery errors
2) Offset EMR costs by reducing: duplicate orders, paper forms and documentation filing costs, transcription costs, pharmacist costs, drug wastage, emergency room and inpatient hospital visits
3) Improve quality via: reducing time spent manually printing paper MARs, improving provider effectiveness, automating immunization registry reporting, decreasing the amount of physical label manipulations, decreasing cycle time for drug orders to delivery, data collection and CQI, increasing accountability, reducing offender complaints, maintaining care from one location to the next, more efficient appointment scheduling, improving accessibility of medical documentation, reducing wait times, providing more accurate and sustainable care to those in our charge.

Project Status Category Guidelines

Schedule Status
Green – Indicates that the project or phase is on track for the targeted implementation date.
Yellow – Indicates that the project or phase <u>may be falling behind</u> and analysis needs to be done to determine if

Project Status Category Guidelines
the project can recover and still achieve the targeted implementation date, or if adjustments must be made to that date. **Red** – Indicates that the project or critical tasks <u>have fallen behind</u> schedule, and corrective action must be taken to still achieve the targeted implementation date or that date must be changed.
Budget Status **Green** – Currently on target with project budget. **Yellow** – Project is over budget by 10 to 25%. **Red** – Project is over budget by 25% or more.